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Information Disclosure Statement by Applicant

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Applicant: BOLDRIN et al.

Appln. S.N.: 10/590174

Filing Date: August 18, 2006

Examiner:

Group Art Unit:

Date: August 18, 2006

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U.S. PATENT/PATENT APPLICATION DOCUMENTS

Examiner's Initials		Document Number	Date MM/YYYY	Name (Family Name of First Inventor)	Class	Sub Class	Filing Date (if appropriate)
/MD/	AR	5,410,861	05/1995	Medlock			
/MD/	BR	4,041,672	08/1977	Gularte			
/MD/	CR	3,637,091	01/1972	Mickelson			
	DR						
	ER						
	FR						
	GR						
	HR						
	IR						
	JR						
	KR						
	LR						
	MR						
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FOREIGN PATENT DOCUMENTS

						English Abstract		Translation Readily Available?	
		Document Number	Date MM/YY YY	Country	Inventor Name	Enclosed/ Cited Above	N O	Enclosed/ Cited Above	N O
/MD/	OR	WO 01/85581A1	11/2001	PCT	Rovers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
/MD/	PR	WO 97/11014	03/1997	PCT	Langen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
/MD/	QR	EP0496046A1	07/1992	EPO	Colombo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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OTHER (Including in this order Author, Title, Periodical Name, Pertinent Pages, etc.)

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	AAR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	BBR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	CCR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Examiner: /Mark Deuble/ (12/18/2007)

Date Considered: 12/18/2007

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